

Please type a plus sign (+) inside this box ☐

<div>0010/PTO Rev. 6/95</div> <div></div> <div>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</div> <div><input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing</div>	Attorney Docket Number	250591.90112
	First Named Inventor	Carlos De La Hueraga
	COMPLETE IF KNOWN	
	Application Number	09/247,349
	Filing Date	February 10, 1999
	Group Art Unit	
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND SYSTEM FOR AUTOMATED DATA STORAGE AND RETRIEVAL

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign applications numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
60/023,126	07/30/96	

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

EXPRESS MAIL LABEL NO. _____



PTO/SB/09 (6-95)

Approved for use through 9/30/98. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

**VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) and 1.27(b))--INDEPENDENT INVENTOR**

Docket Number (Optional)

250591.90112

Applicant or Patentee: Carlos De La Huerqa

Serial or Patent No.: 09/247,349

Filed or Issued: February 10, 1999

Title: METHOD AND SYSTEM FOR AUTOMATED DATA STORAGE AND RETRIEVAL

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office with regard to the invention described in:

☐ the specification filed herewith with the title as listed above.

☒ the application identified above.

☐ the patent identified above.

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

☐ No such person, concern, or organization exists.

☐ Each such person, concern or organization is listed below.

FULL NAME _____

ADDRESS _____

Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Carlos De La Huerqa

NAME OF INVENTOR

NAME OF INVENTOR

NAME OF INVENTOR


Signature of Inventor

Signature of Inventor

Signature of Inventor

April 26 99
Date

Date

Date

Burden Hour Statement: This form is estimated to take .3 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box ☐

DECLARATION						Page 2		
I hereby claim benefit under Title 35, United States Code §120 of any United States application(s), or §365(C) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT international application in the manner provided in the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.								
U.S. Parent Application Number		PCT Parent Number		Parent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)		
08/727,293 08/871,818				10/09/96 06/09/97				
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto								
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and divisional applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:								
<input type="checkbox"/> Firm Name Customer Number or label 								
<input checked="" type="checkbox"/> List attorney(s) and/or agent(s) name and registration number below								
Name		Registration Number		Name		Registration Number		
Neil E. Hamilton		19,869		Robert J. Sacco		35,667		
Thomas W. Ehrmann		20,374		Jean C. Baker		35,433		
Barry E. Sammons		25,608		David G. Ryser		36,407		
J. Rodman Steele		25,931		Bennett J. Berson		37,094		
Nicholas J. Seay		27,386		Michael A. Jaskolski		37,551		
George E. Haas		27,642		Allen J. Moss		38,567		
Harvey D. Fried		28,298		Sherry Whitney		39,422		
Michael J. McGovern		28,326		Jill A. Fahrlander		42,518		
Carl R. Schwartz		29,437		Scott D. Paul		42,984		
Gregory A. Nelson		30,577		Daniel G. Radler		43,028		
Keith M. Baxter		31,233		Steven J. Wietrzny		P44,402		
John D. Franzini		31,356						
Joseph W. Bain		34,290						
<input type="checkbox"/> Additional attorney(s) and/or agents named on a supplemental priority sheet attached hereto								
Please direct all correspondence to <input type="checkbox"/> Customer Number or label OR <input checked="" type="checkbox"/> Fill in correspondence address below								
Name		Michael A. Jaskolski						
Address		Quarles & Brady LLP						
Address		411 East Wisconsin Ave. Suite 2550						
City		Milwaukee		State		WI		
Country		USA		Telephone		(414) 277-5000		
				Fax		(414) 271-3552		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.								
Name of Sole or First Inventor:				A petition has been filed for this unsigned inventor				
Given Name		Carlos		Middle Initial		Family Name		
						De La Huerga		
Inventor's Signature							Date	
							Apr 26 99	
Residence:		Milwaukee		State		WI		
				Country		USA		
Post Office		9190 North Upper River Road						
Post Office								
City		Milwaukee		State		WI		
		Zip		53217		Country		
						Applicant Authority		
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto								